

MIDDLETON HIGH SCHOOL
CURRICULAR/CO-CURRICULAR PERMISSION FORM &
PRE-PLANNED ABSENCE FORM

Please fill it out completely and be thoroughly familiar with MHS Field Trip Policy.

Student Name: _____ Grade: _____

Date(s) of Activity/Absence _____

Activity/Reason for Absence _____

Emergency Contact and Health Information

Name: _____ Relationship: _____ Telephone: _____

Known health problems/concerns and/or precautions to take:

List any medications to be administered by school personnel during this activity

(If medication/dosage/time is different than presently prescribed for school, additional forms will be needed)

Retain your copy of this form in case any questions arise later concerning this absence.

	<u>CLASS</u>	<u>CURRENT GRADE</u>	<u>TEACHER COMMENTS/RECOMMENDATIONS</u>	<u>TEACHER INITIALS</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____

I give permission for my student to attend the activity described above. I recognize that my student is responsible for work missed as required by each teacher.

Signature of Parent/Guardian

Date

Signature of Asst. Principal (for Planned Extended Absences only)

Date